

A STUDY TO INVESTIGATE THE ANXIETY LEVEL OF M.PHIL STUDENTS AT ENTRY LEVEL

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ABSTRACT

Output of Education largely depends on input made along with the potential of learner. Environment of learning, aptitude of learner, tutor, resource person, and peer groups have significant importance in determining the anxiety level of the learner. This study investigates the anxiety level of M.Phil students of The Islamia University of Bahawalpur, Pakistan at entrance level in the programme. Study was delimited to the academic session 2006- 2007. All the students (200) from the M.Phil level were selected as sample which was 100% of the total population. A 39 item rating scale was used as tool. Findings include that an entry into the programme students interest increased, as a result of motivated feeling of relationship with university. On the other hand, impaired hearing, impaired vision and over-eating were symptoms of anxiety. It is recommended that an introductory positive orientation letter may be served to the students, and first session of workshop may be devoted to anxiety relaxation techniques. Anxiety level of students may also be assessed after first semester, so that remedial treatment may be given to the needy students.

Keywords: Anxiety Level, Tension, Interest, Sensitive, M.phil Programme, Anxiety, Mood, Depression.

INTRODUCTION

Education is considered as a process as well as product and is supposed to prepare one for better life while teaching learning process is concerned with the promotion of desirable behavior. Thus education has to focus on the conditions that provide bases for learning. Development and reshaping of attitudes is an important aspect of learning.

Attitudes associated with programmes and subjects have impact on the student participation level and achievement. Researchers examining the psychological effects found that a student's self concept of his ability to perform in a subject is positively correlated with the achievement.

Anxiety is an unpleasant state which is associated with feelings of uneasiness and apprehension. It is uneasiness over an anticipated situation or object that typically would not produce discomfort in rational individuals (Kendall & Hammen, 2000).

Anxiety is usually considered to be a highlighted

physiological state which has cognitive, semantic, emotional and behavioral components (Seligman, Walker and Rasenhen, 2001). All these components may combine to create feeling of uneasiness. The state of anxiety usually combines heart palpitation, nausea, pain, and headache or digestion disorder. Everyone of us may feel anxiety at one or the other time in one's life. Usually this is the result of stressful situation, so anxiety is part of our life. Smith, et al. (2007) view anxiety as today's way of warning, and hence it is adaptive. Anxiety prepares a person to face threat. When anxiety is prolonged to be intense, distressing and unwanted, it turns into anxiety disorder. Anxiety disorder hinders oneself from normal life functioning.

Psychological symptoms of anxiety include irritability, lack of concentration, strange thoughts, mood swings etc.

DSM-III-R classifies the symptom of anxiety into three categories:

- Motor tension
- Autonomic hyperactivity

- Vigilance and scanning

According to DSM-IV excessive anxiety must have at least three of these symptoms:

- Restlessness
- Easily fatigued
- Muscle tension
- Sleep disturbance

Common complaints of anxiety include persistent tension, nervousness, heart palpitation, swelling, trembling, dizziness and concentration problems. Anxiety may be of many types. Paul Tillich and Freud see anxiety as Trauma of none being. Test anxiety is uneasiness, apprehensions or nervousness felt by students who have fear of test. Wikipedia Free Encyclopedia identifies that student may experience association of grades with personal worth, embracement by a teacher, taking a class that is beyond their ability, feeling of alienation from parents or friends, time pressures feeling a loss of control, dizziness, headaches, racing heartbeats, nausea, fidgeting and drumming on a desk. Anxiety symptoms range from mild uneasiness to intense condition, a certain amount of anxiety may raise arousal level and might improve performance.

Types of anxiety include signal anxiety, anxiety trait, anxiety state and free floating anxiety. Signal anxiety is considered as anxiety to an anticipated event. A distance education student who is normally relaxed before receiving bulk of study material, but after receipt of study material, he is anxious this is signal anxiety. While anxiety trait is "component of personality" it means it is present over a time period. This can be measured by using observational techniques. An anxiety state occurs as a result of a stress situation in which a person loses his emotions. Free floating anxiety is that which is always present and accompanied by a feeling of dread. A person may exhibit ritualistic and avoidable behaviour. Severity of anxiety may be normal, acute, chronic and panic. Normal anxiety is of small degree and it motivates the student. Acute anxiety interferes with one's ability to think and creates extreme nervousness. It usually occurs suddenly but lasts over a small period. Chronic anxiety

may sustain for months or years. Panic activity is severe form of anxiety which disintegrates the personality.

Causes of anxiety include factors such as stress, childhood conflicts, faulty learning, social and cultural factors, etc. McFarland and Walsi (1992) listed 16 factors which may cause anxiety. Symptoms of anxiety may range from state of euphoria to panic and are also grouped into five levels as given below:

Level 0: Euphoria: an exaggerated feeling of which are not directly proportionate to a specific situation.

Level 1: Mild Anxiety: positive experience with increased ability to learn, motivated feeling of restlessness, may not be able to relax.

Level 2: Moderate anxiety: narrows down the perception, voice tremors, increased, physiological changes.

Level 3: Severe anxiety: perception reduced, focus on small details of inability to communicate clearly, decreased intellectual thought process, and feeling of purposelessness.

Level 4: Panic state: complete disruption of ability to perceive, disfiguration of personality and loss of control. Panic attack may last over 15-30 minutes.

Anxiety might be classified on more than one criterion. Generalized anxiety disorder (GAD) is characterized by excessive exaggerated anxiety and worrying about every day life events. People suffering from GAD remain worried about their health, business, education, family etc. Here worry is not pseudo, but rather disturbs daily life. Symptoms of GAD might include these "excessive, on going worry tension, unrealistic view of problems, restlessness or feeling of being "edgy", irritability, muscle tension, headaches, sweating, difficulty in concentrating, nausea, frequent bathroom, tiredness, trouble in sleeping, teeming and easily started".

Generalized Anxiety Disorder (GAD) is characterized by Kendall and Hammen (2000, p.164) as, "phobia, specific phobia, social phobia, panic attack, agoraphobia, obsessive compulsive disorder (OCD), post traumatic stress disorder and acute stress disorder". GAD occurs in all cultures, ages but likely to occur before age of 30. Studies by Clinger, Martin Clayton and Guze (1981) and

Dovidson et al. (1985) as quoted by (Forgersen, 1988, p.162) suggested that a specific familial transmission of generalized anxiety disorder is negligible.

The client with GAD in general, excessively remains worried about social evaluation (Borkevee, 1985) as society is everywhere. By cognitive vigilant (worrying) GAD sufferer gains a false sense of control.

Obsessive compulsive disorders (OCD) is that type of anxiety disorder which is characterized by unwanted thoughts or behaviors, i.e. recurring worry that "I have forgotten to switch off lights, heater, washing hand over and over" etc. Separation Anxiety is normal part of child development, which occurs when a child is away from home or parents. Social Anxiety or Social Phobia is anxiety when one has a feeling of being humiliated in public or one might experience extreme shyness. Performance anxiety is the most common type of social phobia.

Causes and Risk Factors

There are a number of causes which contribute to anxiety disorders Environment, family structure, brain chemistry, genetics, financial problems, marital problems. ([http://anxiety attacks and disorders symptoms, types, treatment.htm](http://anxietyattacksanddisorderssymptoms/types/treatment.htm), retrieved on 29-08-2007). But the important thing is that no single factor alone leads to anxiety disorder.

Phobia: Unlike GAD, phobic disorder is specific in nature. Phobias are intense, recurrent and inappropriate to actual situation, common examples are dogs, rats etc. It is unrealistic or an exaggerated fear of a specific object, situation etc which in reality has no danger.

Specific phobia in general is more often in female. Women generally outnumber men 2 to 1.

Phobic disorders are the most common anxiety prevalence - 14.2%. During past decades several researches have been carried out to study the occurrence. Early estimates of phobia, agoraphobia, total phobia in different states of America, occurrence of these in men were less than women. (Eaton, Dryman and Weisman, 1991).

Anxiety might have four theoretical perspectives, biological, psychodynamic, behavioral and cognitive.

There are at present 700 identified phobias.

Some psychologists measure state and trait anxiety through physical signs: heart rate, respiration skin conductance and bio chemistry.

Anxiety disorder may include:

- Panic disorder
- Post traumatic stress disorder
- Social anxiety
- Generalized anxiety disorder
- Agoraphobia
- Specific phobia (e.g. fear of operation, flying water etc)
- Obsessive compulsive disorder (<http://psychological.anxiety.disorder.htm>, retrieved on 25-8-2007)

There are many psychological measures in both global and multidimensional self report. In global measure, people rate how nervous they feel, using self report scales from low to high. Summing scores of individual items produce total score. In multidimensional self report measures, how worried (cognitive state anxiety) and how physiologically activated they feel from low to high are repeated.

Anxiety is an alert signal associated with nervousness, worry and apprehension and associated with activation and arousal of body. Thus cognitive component is there. Usually it is a psychological impact and not a physical one. This alert signal motivates us to solve the problem.

In United States, people visit the physicians for anxiety disorders more than those of cough and fever. (<http://psychological.anxiety.disorder.htm>, retrieved on 25-8-2007) Many anti anxiety medicines produce dependency. Withdrawal symptoms are common.

Anxiety may be found in students as they might not be well prepared to heavy study packages. Anxious student and complex subject matter combine to create a difficult environment of learning. Such environment may create the following four problems:

1. Anxiety blocks the normal thought process.
2. Anxiety favours a passiveness to material rather than interaction with it.

3. Anxiety is associated with a general sense of incompetence.

(<http://mcmaster.ca/c11/paped/pastissues/volume.1No.3/reducing.anxiety.htm>, retrieved on 12-11-2007.

Treatment

Most anxiety disorders are treated with cognitive behavioral therapy (CBT), medication or blend of these two. CBT as name speaks focuses on thinking disorder and behaviors. It takes 12-20 weeks. This may take place in individual as well as group level. Medication includes anti anxiety drugs, anti depressants and beta blockers, natural and herbal treatments are also in use. Other anxiety disorder treatment includes relaxation techniques and self help. But far better results, cultivation of support system is necessary.

Objectives of the Study

Objectives of the study were:

1. To identify different types of anxiety.
2. To find out the anxiety level of M.Phil students at The Islamia University of Bahawalpur.

Population

Students enrolled in M.Phil Programmes of The Islamia University of Bahawalpur in the session 2006 - 2007.

Sample

All 200 students who have been admitted to The Islamia University Bahawalpur in the session 2006-2007 to M.Phil programmes, were considered as sample of the study.

Methodology of the Study

The study was descriptive in its nature, after survey of related literature an anxiety scale on 4 points was designed and developed. The draft was validated by five psychologist and five educationists. After professional judgmental validation, face sheet was placed on the scale. The scale included 39 items, which described different types of anxiety and scale was pilot tested by determining the (reliability) internal consistency. The value of Cronbach's Alpha was calculated as 0.843. The finalized version of scale was served to the students after one month of their classes being started and only 150

students (75%) responded and returned the scale.

Data Analysis

The data collected through scale was coded and analyzed through Microsoft Excel in terms of mean scores. Scale values assigned to each of the five responses were as follows:

Level of Agreement	Scale Value
A. To large extent	4
B. To same extent	3
C. To little extent	2
D. No effect	1

Mean score calculated through the following formula = $4(FA) + 3(FB) + 2(FC) + 1(FD)$

Total Number of responses

Where:

FA means the frequency of the learners choosing the statement "A".

FB means the frequency of the learners choosing the statement "B"

FC means the frequency of the learners choosing the statement "C"

FD means the frequency of the learners choosing the statement "D"

The following scale of the mean was formulated for interpretation of mean score on anxiety scale

Range of Mean	Value
0.5 - 1.5	No effect
1.5 - 2.5	To a little extent
2.5 - 3.5	To same extent
3.5 and above	To large extent

Findings

It is evident from Table 1., that the highest mean score is on *increased interest* and it is 3.68, which shows that the interest of the M.Phil students has been increased to a large extent. The mean score on *motivation* is 3.61, which also shows that students' motivation has also been, increased to a large extent. On *relationship with university*, the mean score is 3.35 which shows that

students are having relationship with university to some extent. On *realized one's own potential*, the mean score is 3.22, which shows that students have realized their own potential to some extent. The mean score on *accepted by others* is 2.87, which shows that students are accepted by others to some extent. The mean score on *approval of gain* is 2.82, which shows that students have gained approval to some extent. The mean score on *aroused* is 2.80, which shows that students have been stimulated to some extent. The mean score on *sensitivity to M.Phil* is 2.79, which shows that students are sensitive to M.Phil programme to some extent. The mean score on *relaxed* is 2.77, which shows that students are relaxed to some extent but not fully relaxed. The mean score on *increased in arousal* is 2.71, which shows that students have been encouraged to some extent. The mean score on *pushed forward internally* is 2.70, which is also in the range to some extent.

Table 2. shows that the mean score on *reduction in body tension* is 2.70, which shows that students' body tension is reduced to some extent and body tension still in the students. The mean score 'on *incentives*' is also 2.70, which shows that students have been given incentives but

Statement	To large extent	To some extent	To a little extent	No effect	Total score	Mean Score
Increased Interest	92	32	18	8	508	3.6811594
Motivated	87	33	21	9	498	3.6086957
Relationship with university	69	45	15	21	462	3.3478261
Realized one's own potential	68	38	15	29	445	3.2246377
Accepted by others	34	40	64	12	396	2.8695652
Gain approval	43	31	48	28	389	2.8188406
Aroused	54	15	45	36	387	2.8043478
Sensitive to M.Phil/ Ph.D	57	15	33	45	384	2.7826087
Relaxed	46	30	34	40	382	2.7681159
Increase in arousal	40	34	35	41	373	2.7028986
Pushed forward internally	61	37	36	16	373	2.7028986

Table 1. Showing the mean score of students on anxiety scale in descending order

to some extent. The mean score on *anxiousness of the students toward M.Phil programme* is 2.48, which shows that students are anxious but to a little extent. The mean score on *fear* is 2.38, which shows that students are fearful toward M.Phil programme but to a little extent. The mean score on *disturbance of mood* is 2.22, which shows that students' mood have been disturbed but to a little extent. The mean score on *anger* is 2.17, which shows that due to M.Phil programme students' anger has been increased but to a little extent. The mean score on *headaches* is 2.13, which also shows that students' headaches have been increased to a little extent due to M.Phil programme. It is evident from Table 3. that the mean score on *depression* is 2.12, which also proves that students' depression has been increased to a little extent. The mean score on *dependency* is 2.06 which shows that students' dependency have been increased but to a little extent. The mean score on *self anger and boredom* is 1.96, which shows that students are having self anger and boredom but to a little extent. The mean score on *forgetfulness, agitation and reduction of interest* is 1.83, which shows that M.Phil has effected the characteristics of forgetfulness, agitation and reduction of interest to a little extent.

Table 4. shows that the mean score on *avoidance and increased hunger* is 1.83, which shows that the avoidance and increased in hunger has been effected to a little extent. The mean score on *loss of cognitive activity* is 1.77, which shows that students have lost their cognitive

Statement	To large extent	To some extent	To a little extent	No effect	Total score	Mean Score
Reduction body tension	39	33	39	39	372	2.6956522
Incentive	39	33	39	39	372	2.6956522
Anxious	33	33	27	57	342	2.4782609
Fear	29	29	34	58	329	2.384058
Disturbance of mood	27	21	33	69	306	2.2173913
Anger	0	48	42	72	300	2.173913
Headaches	15	33	33	69	294	2.1304348

Table 2. Showing the mean score of students on anxiety scale in descending order

Statement	To large extent	To some extent	To a little extent	No effect	Total score	Mean Score
Depression	26	12	40	72	292	2.115942
Indifferent	19	31	19	81	288	2.0869565
Depression of mood	15	27	39	69	288	2.0869565
Dependency	9	36	35	70	284	2.057971
Muscular aches	13	34	15	88	272	1.9710145
Self onger	9	33	27	81	270	1.9565217
Boredom	12	18	48	72	270	1.9565217
Forget ness	12	18	30	90	252	1.826087
Agitated	8	26	26	90	252	1.826087
Reduced interest	15	21	15	99	252	1.826087

Table 3. Showing the mean score of students on anxiety scale in descending order

abilities to a little extent. The mean score on *helplessness* is 1.74, which shows that students are despair to a little extent. The mean score on *irritable* is 1.70, which shows that students are short tempered to a little extent as well having the abnormal pain due to M.Phil programme. The mean score on *loss of initiatives* is 1.65, which shows that students' vision has been weakened to a little extent. The mean score on *aggressiveness* is 1.61, which shows that students have been aggressive due to M.Phil programme. The mean score on *over eating* is 1.57,

Statement	To large extent	To some extent	To a little extent	No effect	Total score	Mean Score
Avoidonce	9	15	45	81	252	1.826087
Increased hunger	16	16	22	96	252	1.826087
Loss of cognitive activity	12	15	27	96	243	1.7608696
Hopelessness	9	15	33	93	240	1.7391304
Irritable	3	27	21	99	234	1.6956522
Abnormal pain	6	27	12	105	234	1.6956522
Loss of Initiative	15	3	27	105	228	1.6521739
Impoired vision	16	9	9	116	225	1.6304348
Aggressive	6	9	36	99	222	1.6086957
Over eoting	4	22	10	114	216	1.5652174
Impoired hearing	6	12	9	123	201	1.4565217

Table 4. Showing the mean score of students on anxiety scale in descending order

which also proves that students have started over eating to a little extent due to M.Phil programme, and the mean score on '*impaired hearing*' is 1.46, which shows that M.Phil programme has no effect on the hearing of the students.

Discussion

Results show that the interest of the students increased at the entry level in the program of M. Phil in Education because it gained the highest score among all the aspects included in this anxiety scale. They seem to be interested in the program to great extent. Students were also motivated towards their studies at the entry level of M. Phil program. Because results show that this aspect also gained higher score among all the aspects of this scale. Motivation is a great source to increase students learning. And this aspect is very much prominent in results. They do not have much relationship with university regarding different matters. This aspect decreased in the results as compared to motivation and creating interest in students by the department. To some extent students realized their potential regarding studies and other academic matters. It seems they are confident and that they have potential to deal with situations. But this quality is lower as compared to other factors mentioned above. The results on acceptance of students by others in the university show that they are not very much accepted by the institution. In this situation, students loss confidence if they are not recognized or accepted in the environment where they are surviving. Results show that students of this program gained arousal in the university. In other words it can be said that they were stimulated by the environment provided to them at the institution. But this aspect gained a very little value as compared to other aspects mentioned above. But it seems that to some extent they got stimulation in one way or the other. Students were little bit sensitive towards M. Phil or Ph.D program. As they did not know the situations or may be due to the rules and regulation of the university, Students could not get relaxation to much extent. It means there were some kind of tension in their minds regarding the systems and the procedures. Students were encouraged to join new programs on the field of study but not very much.

Encouragement is a source to enhance interest in studies. Their interest was aroused but not very much (Refer Table 1).

To arouse internal capabilities and pushing forward to achieve the objectives is a great factor for the students to increase their interest in studies. If the student is internally motivated, its effects will be for longer period. But the results of this study show that the students of M. Phil program have not been motivated internally very much but to some extent. Students could not get their bodies free from tension at the entry level that was shown by the results of this study. The admission in this program was a source of incentive for the students. They were given incentives in kind of marks or other appreciations but very low. Students seem to be anxious towards this program but not very much. Students were fearful about this program but to some extent. They may have different types of fears in their mind regarding new program. Here it is the same situation. The students of M. Phil program could not get them free of the fear of this institution, only to some extent. At this level students mood was disturbed due to many reasons in this institution. But its effects were low on students. A person can work well in smooth and healthy environment, if they are not provided the same, their moods may be disturbed. So results show that these students faced the same situation but not too much. Mean score on anger shows that this quality has been increased in the students but not too much. They were angry to the situations at this level due to many reasons. Students were not fully relaxed at the entry level, it was the cause of headache for the students. Their headache was increased to some extent (Table 2).

Students were also depressed at this level but not too much. It seems that this program was a cause of some kind of depression for the students to some extent. Students' dependency was increased at this level may be due to joining new program. They seemed little bit dependent. Mean score on getting boredom shows those students were not very much interested at this level. The mean score on forgetfulness, agitation and reduction of interest shows that these aspects were increased in the students little bit more but not to much extent. It seems

that students lose their interest, as well as their habit of forgetfulness and agitation increased to some extent (Table 3).

There was increase in hunger of the students at this level. They felt hunger more than before and the factor of avoidance was also increased but not too much. The results show that this entry level affected their cognitive abilities to some extent. Cognition is a major part of mental characteristics. But at this level results show that this ability was decreased by the institution to some extent. Students felt themselves little bit help less at entry level, which may be due to non-provision of guidance and other factors like that. That's why there is a little bit increase in despair of the students. M. Phil program increased the students' irritation to some extent. They seemed to be short tempered at this level. Students were able to take initiatives. Here results show that this ability was weakened and their vision was shortened by this program to some extent. The quality of aggressiveness was increased due to this program to some extent. They have started over eating, may be due to tension or dissatisfaction in this program but this program did not affect the hearing ability of the students at entry level. This is a positive sign for the institution to start new program (Table 4).

Conclusion

On the basis of the findings and discussion, following conclusions were drawn.

- M. Phil program was a great source of creating interest and motivation level to the students at entry level.
- Students did not have strong relationship with the university.
- Students' potential seems to be decreased.
- Internal capabilities of the students were not awakened or taken into consideration.
- Students were found little bit fearful of this program.
- A healthy and smooth environment is a great source of motivation for the students.
- Students could not get them relaxed from the tensions regarding joining new class.

- Students' independency was found to be decreased.
- They felt boredom and forgetfulness at entry level in this new program.
- Cognitive abilities were decreased a little bit by the program.
- Students seemed to be in the state of tension and aggression.
- They were not found to be satisfied at the entry level of this program.

Recommendations

Following recommendations are provided on the basis of the drawn conclusions.

- There should have been an orientation meeting/ seminar for the students after admission.
- Students should be psychologically tested by the institution knowing about their interest, abilities or capabilities.
- They should be involved in educational activities more and more to increase their cognitive abilities and others.
- Cooperation with the students at department level can decrease the tension and dissatisfaction of the fresh students.
- Students should be given independent tasks to achieve so that their abilities to take initiatives may arise.
- Rules and regulations should be displayed before time.
- A healthy environment to work and study as well, should be created.
- To check students' potential they can be given individual tasks.

References

[1]. Jim Flock (1987) *Anxiety Symptom, Causes, Signs and*

Treatment on Medicine, <http://www.anxiety/anxiety-symptoms>, retrieved on 29-08-2007.

[2]. Borkovec, T. D. (1985) Worry: A Potentially Valuable Concept: *Behaviour Research and Therapy*, 4, 481-482.

[3]. Eaton, W. W., Dryman, A. Q. & Weisman, M. M. (1991) Panic and Phobia, in L.N. Robin and D.A. Reiger, (Eds) *Psychiatric Disorders In America*. New York: The Free Press.

[4]. Forgerson, S. (1988) Genetics. In C. Last and M. Hersen (Eds). *Handbook of Anxiety Disorders*. New York: Pergoman Press.

[5]. Kendall, P. & Hammen, G. (2000) *Abnormal Psychology*. Boston: Houghton Mifflin Company.

[6]. McFarland & Evelyn L, Walsi (1992). *Nursing diagnosis and process psychiatric model health*. Philadelphia: Lippincot Williams & Wilkins

[7]. Myers, J.K. et al. (1984) Six Months Prevalence of Psychiatric Disorders in three Communities: 1980 to 1982. *Archives of General Psychiatry* 50, 95-107.

[8]. Philips, B. N., Martin, R. P. & Meyers, J. (1972) Interactions in Relation to Anxiety in School, in C.D. Spielberger (ed.) *Anxiety: Current Trends in Theory and Research*, Vol.II. New York: Academic Press.

[9]. Shives, L. R. (1994) *Basic Concepts of Psychiatric Mental Health Nursing* (3rd Edition). Philadelphia: J.B. Lippincott Company.

[10]. Smith, M. with Contributions from Gine Kemp, M.A., Heather, Larson, Jeelline Jaffe, Ph.D and Jeame Segal, *Anxiety Attacks and Disorders: Symptoms, Types and Treatment*. <http://Anxiety.attacks.and.disorders.types.and.treatment.htm>, retrieved on 29-08-2007.

[11]. Saligman, M. E. P., Walker, E. F. & Rosenhen, D. L. (2001) *Abnormal Psychology* (4th Ed.) New York: W. W. Norton and Company.

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